

ENTRY BLANK

6E0'S TABLE

DO NOT DETACH

PLEASE TYPE OR PRINT

☒ Ms.

☐ Mr. Artist

Maryann Cox

(Last Name Last)

Permanent

Address

38 Poland Manor Poland OH

Street

City

44514

Zip

Daytime Tel. (216)

Area Code

757-1731

Temporary or

Studio Address

"

Street

City

Daytime Tel. ()

Zip

Area Code

If you do not presently live in one of the counties of the Western Reserve, in which county were you born?

Collaborator

(If Any)

If May Show entries are not accepted or not sold:

☒ Artist will pick up at Museum.

☐ Museum should dispose of.

☐ Museum should ship to artist at artist's expense to this address:

Special Instructions

When necessary include below instructions or a drawing of how the object is to be assembled and displayed.

This Entry Blank must be fully made out and signed. Unsigned Entry Blanks will not be accepted.

Note carefully calendar for delivery and return of objects. It is understood that the Museum will have the right to dispose for its own account any objects not called for by the dates listed.

It is also understood that accepted objects will remain on exhibition until July 21, 1985.

The submission of objects will be construed as an acceptance by the artist of all terms and conditions printed in the Entry Information.

Signature

Maryann Cox

DO NOT DETACH

ENTRY BLANKS

1

- ☐ 1. Paintings ☐ 2. Graphics ☐ 3. Photography
☐ 4. Sculpture ☒ 5. Crafts

Materials

stoneware

Title

Blue Horizons

sold

Price or NFS

\$400-

Insurance Value
if NFS Only

Size

75"

#26.00

GRAPHICS AND PHOTOGRAPHY ONLY

Additional No.
For Sale

Total No. in Edition

Price
Unframed

Price of
Frame

ACCEPTED

REJECTED

DO NOT WRITE IN THIS SECTION

43(P)

ACCEPTED

REJECTED

2

- ☐ 1. Paintings ☐ 2. Graphics ☐ 3. Photography
☐ 4. Sculpture ☒ 5. Crafts

Materials

NW 064809

Mayam Co

stoneware

Title

Content/content

Price or NFS

\$475-

Insurance Value
If NFS Only

Size

3' x 14"

#30.87

GRAPHICS AND PHOTOGRAPHY ONLY

Additional No.
For Sale

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Price
Unframed

Price of
Frame

ACCEPTED

REJECTED

DO NOT WRITE IN
THIS SECTION

44(P)

ACCEPTED

REJECTED

RECEIVED

DATE

5/10

DETACH